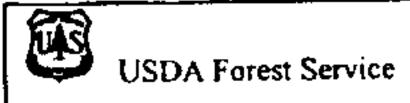


MODIFICATION OF GRANT OR AGREEMENT					PAGE	OF PAGES	
					1	2	
<b>*</b>			DOPERATOR GRANT or UMBER, IF ANY:	3. MODIFICA	TION NUMBER	R:	
11-FI-11051660-103			UNIDER, IF ANT.	1			
4. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING GRANT/AGREEMENT (unit name, street, city, state, and zip + 4): Stanislaus National Forest, 19777 Greenley Road, Sonora, CA 95370			5. NAME/ADDRESS OF U.S. FOREST SERVICE UNIT ADMINISTERING PROJECT/ACTIVITY (unit name, street, city, state, and zip + 4): Stanislaus National Forest, Wendy Flannery, 19777 Greenley Road, Sonora, CA 95370				
6. NAME/ADDRESS OF RECIPIENT/COOPERATOR (street, city, state, and zip ± 4, county): Office of the Fire Warden, Stanislaus County 3705 Oakdale Road, Modesto, CA 95357			7. RECIPIENT/COOPERATOR'S HHS SUB ACCOUNT NUMBER (For HHS payment use only):				
8. PURPOSE OF MODIFICATION							
CHECK ALL	This modification is issued particular to the inscrinction provides in the grant agreement						
THAT APPLY:	referenced in item no. 1, above.						
	CHANGE IN PERFORMANCE PERIOD: 04/01/2012 – 04/01/2013						
	CHANGE IN FUNDING:						
	ADMINISTRATIVE CHANGES:						
	OTHER (Specify type of modification):						
Except as provided herein, all terms and conditions of the Grant/Agreement referenced in 1, above, remain unchanged and in full							
force and effect.  9. ADDITIONAL SPACE FOR DESCRIPTION OF MODIFICATION (add additional pages as needed):							
7. ADDITIONAL SI ACLI OR DESCRIFTION OF MODIFICATION (add additional pages as needed).							
Annual Operating Plan for 2012 is the same and will remain in effect through April 1, 2013							
10. ATTACHED DOCUMENTATION (Check all that apply):							
Revised Scope of Work							
	Revised Financial Plan						
	Other:						
11. SIGNATURES							
AUTHORIZED REPRESENTATIVE: BY SIGNATURE BELOW, THE SIGNING PARTIES CERTIFY THAT THEY ARE THE OFFICIAL REPRESENTATIVES OF							
THEIR RESPECTIVE PARTIES AND AUTHORIZED TO ACT IN THEIR RESPECTIVE AREAS FOR MATTERS RELATED TO THE ABOVE-REFERENCED GRANT/AGREEMENT.							
11.A. SIGNATURE  11.B. DATE SIGNED  SIGNATURE  (Signature of Signatory Official)  11.C. U.S. FOREST SERVICE SIGNATURE  SIGNED  (Signature of Signatory Official)						ı	
1). E. NAME (type or print): Gary Hinshaw No Will Mills 11. F. NAME (type or print): Susan Skalski							
11.G. TITLE (type or print): Fire Warden <i>LEO</i> 11.H. TITLE (type or print): Forest Supervisor							
12. G&A REVIEW							
12.A. The authority and format of this modification have been reviewed and approved for signature by:  12.B. DATE SIGNED							
12ma 7/00s						, <i>j</i>	
	DANA MEES U.S. Forest Service Grants & Agreements Specialist						



## **Burden Statement**

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